

LETTERS *to the Editor*

Supermarket Medicine

To the Editor: The average American's love affair with his car together with a craving for convenience has spawned all kinds of roadside industries. Here in the West we can mail a letter, make a bank deposit, obtain almost any form of food from fish and chips to fried chicken, see a movie and even listen to a Sunday sermon in church all without leaving our cars. The natural center for most of this commercial attraction has become the shopping center parking lot.

It is far from uncommon to see among the popcorn stands and the fried chicken counters some form of paramedical mobile van. If the public now looks to the shopping center with almost the same confidence it used to reserve for the medical center, perhaps we are ourselves partly to blame.

It was back in the days of World War II when the recruitment of large numbers of blood donors was a national necessity that someone conceived the idea of sending specially equipped medical vans prepared to draw blood on the spot out to where people congregated. It was an effort to achieve what retailers call an impulse sale.

At about the same time what may have been over-zealous case finders dispatched well-equipped mobile chest x-ray vans hither and yon from one busy intersection to fairground to city hall courtyard, etc. The public thus became conditioned to accept medical personnel "doing their thing" in all sorts of unusual places.

Accordingly, when it seemed expedient to vaccinate vast numbers of the population as quickly as possible with the newly available Salk vaccine, the medium of the fair booth in the midway, or the mobile van, or the vacant shopping center storefront was a natural locale.

Logically, local Chambers of Commerce, recognizing a good thing when they see it, have prevailed upon local physicians to administer tetanus shots under similar field conditions.

Certainly it is time to step back and ask ourselves just where this de-emphasis of professionalism in medicine is leading us. As I pointed out above, all kinds of diagnostic vans are already commonplace. Many more can be developed. Just last week, for example, a local restaurant displayed an advertisement for a Hearnmobile. How long will it be before someone discovers the commercial salability of the SMA-12 survey. Can't you see the sign, "Come in now—twelve big tests and your blood pressure checked for \$9.95. Double stamps today." Feminine modesty will probably limit Pap smears from gross exploitation but how about tonometry, electrocardiograms and even barium enemas if someone can be found to read them.

The specter of some highly advertised, chrome embellished "Doctor's Market" with its individual booths purveying the illusion of diagnosis or health to the ignorant or unsophisticated is not too far-fetched. Have you seen white-goateed "doctors" taking blood pressures along a midway? A subtle tie-in with a health foods store may not be in the patient's best interest.

How many realize that in many communities the respectable old chest x-ray van is no longer operated by your friendly neighborhood TB Association but is a privately owned commercial enterprise. Who sees to it that female patients who may be pregnant are properly protected against x-ray exposure? Who guards the neurotic from reassuring himself of good health by having an x-ray of the chest every week? Who informs the ignorant that angina doesn't show up on an x-ray and that a negative report does not mean no heart disease?

What to do about it? Certainly one giant step in the right direction is to emphasize to the public and seek legislation from government stressing that anonymous services in a parking lot are not quality medicine and that the way to receive responsible medical care is from an identifiable physician, be he in a private office, health department or clinic.

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